

St. Hilary Parish

Pre-Baptism Registration Form

PRINT or TYPE

Information about the Child:

Child's Name: _____
(first) (middle) (last)

Male (or) Female (please circle) Date of Birth: _____
(month, day, year)

Place of Birth: _____ Was your child privately baptized? (circle one) **Yes No**
(city, state)

Do you want your child baptized with (circle one) **pouring of water** or **immersion** ?

Information about the Parents:

Father's Name: _____
(first) (m.i.) (last)

Religion of Father: _____

Mother's Name: _____
(first) (m.i.) (**MAIDEN** name)

Religion of Mother: _____

Parents Address: _____
(street address)

(city, state, zip)

Email Address: _____

Parents Telephone #: _____ Cell #: _____

Place of Parents Marriage: _____

Date: _____ By: _____

Family is registered at: _____

Information about the Godparents:

Godfather's Name: _____
(first) (m.i.) (last)

Religion: _____ Parish: _____

Godmother's Name: _____
(first) (m.i.) (last)

Religion: _____ Parish: _____

Date of Baptismal Preparation Session: _____

Date of Baptism: _____ **Time:** _____ **Presider:** _____